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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Jose		Gloria
	your government-issued picture identification (for example, your driver's	First name		First name
	license or passport).	Middle name	_	Middle name
	Bring your picture	Ramirez		Ramirez
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1497		xxx-xx-8115

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Debtor 1 **Jose Ramirez**Debtor 2 **Gloria Ramirez**

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
ousiness names and over Identification bers (EIN) you have in the last 8 years de trade names and a business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s) EINs			
e you live	3825 Ridgeland Ave	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Cook County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
you are choosing district to file for ruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	oyer Identification pers (EIN) you have in the last 8 years e trade names and business as names e you live	Business names and oper Identification the last 8 years e trade names and business as names Business name(s) Business name(s) Business name(s) EINs Business name(s) EINs Business name(s) EINs Cook Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			

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	Case 17-0	03993 D0C1	Document	Page 3 of 5	52	
Deb	tor 1 Jose Ramirez tor 2 Gloria Ramirez		Document	r age 5 or 5	Case number (if known)	
Deb	Gioria Raillilez				Case Humber (ii kilowii)	
D	A Tall the Occurt Alexant	V BI (0				
Part						
7.	The chapter of the Bankruptcy Code you are choosing to file under		rief description of each, se go to the top of page 1 and		l by 11 U.S.C. § 342(b) for Individuals Filing for Bankro priate box.	uptcy
	choosing to me under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how you	u may pay. Typically, if you attorney is submitting your	are paying the fe	check with the clerk's office in your local court for more e yourself, you may pay with cash, cashier's check, or behalf, your attorney may pay with a credit card or che	r money
			the fee in installments. I		option, sign and attach the Application for Individuals	to Pay
		☐ I request that	my fee be waived (You r	may request this o	ption only if you are filing for Chapter 7. By law, a judg	
		applies to you	r family size and you are u	inable to pay the fe	if your income is less than 150% of the official poverty ee in installments). If you choose this option, you mus Official Form 103B) and file it with your petition.	
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	Yes.				
	inot o your o	District		When	Case number	
		District		When	Case number	
		District		When	Case number	
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Debtor			Relationship to you	
		District		When	Case number, if known	
		Debtor			Relationship to you	
		District		When	Case number, if known	
11.	Do you rent your residence?	■ No. Go to lir	ne 12.			

☐ Yes.

No. Go to line 12.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

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	otor 1 otor 2	Jose Ramirez Gloria Ramirez		Docum	Case number (if known)				
Par	t 3:	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor				
12.		ou a sole proprietor y full- or part-time less?	■ No.	■ No. Go to Part 4.					
			☐ Yes.	Name and location of bus	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.								
	If you sole p	have more than one proprietorship, use a late sheet and attach		Number, Street, City, Sta	te & ZIP Code				
	it to th	nis petition.			ox to describe your business:				
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
				☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))				
				☐ Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))				
				☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
				■ None of the above	e				
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are small business or?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a	definition of small	■ No.	I am not filing under Chap	oter 11.				
		ess debtor, see 11 c. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
			☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4:	Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention				
14.		ou own or have any	■ No.						
	allego	erty that poses or is ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is the hazard?					
	publi Or do prope	c health or safety? you own any erty that needs diate attention?		If immediate attention is needed, why is it needed?					
	perisi livest or a b	xample, do you own nable goods, or ock that must be fed, uilding that needs tt repairs?		Where is the property?					
					Number, Street, City, State & Zip Code				

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Debtor 1 Jose Ramirez

Debtor 2 Gloria Ramirez

Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-03995 Doc 1 Filed 02/10/17 Entered 02/10/17 18:27:18 Desc Main Document Page 6 of 52

Debtor 1 Jose Ramirez Debtor 2 **Gloria Ramirez** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts ☐ No. I am not filing under Chapter 7. Go to line 18. 17. Are you filing under Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10.000 50.001-100.000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **□** \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose Ramirez /s/ Gloria Ramirez Jose Ramirez **Gloria Ramirez** Signature of Debtor 1 Signature of Debtor 2 Executed on February 10, 2017 Executed on February 10, 2017 MM / DD / YYYY MM / DD / YYYY

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		Document	Page 7 of 52					
Debtor 1 Debtor 2	Jose Ramirez Gloria Ramirez	Case number (if known)						
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)				
	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	rledge after an inquiry that the information in the				
	. •	/s/ Hanna Kayali	Date	February 10, 2017				
		Signature of Attorney for Debtor		MM / DD / YYYY				
		Hanna Kayali						
		Printed name						
		VLO, P.C.						
		Firm name						
		3818 S. Harlem						
		Lyons, IL 60534						
		Number, Street, City, State & ZIP Code						
		Contact phone 312-600-7000	Email address	docs@victorylawoffice.com				

6307906Bar number & State

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		17(1(1))		
Fill in this infor	mation to identify your	case:		
Debtor 1	Jose Ramirez			
	First Name	Middle Name	Last Name	
Debtor 2	Gloria Ramirez			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	110,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	37,307.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	147,307.00
Par	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	157,579.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,416.46
	Your total liabilities	\$	205,995.46
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,508.32
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,570.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose " 11 LLS C. & 101(8). Fill out lines 8-90 for statistical purposes. 28 LLS C. & 159		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Jose Ramirez	S
Debtor 2	Gloria Ramirez	Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. \$_

4,166.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	To	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	C	ase 17-03995	5 Doc 1)2/10/17 Iment	Entered 02/10/17 Page 10 of 52	7 18:27:18	Desc	Main
Fill	in this info	rmation to identify	your case and t			1 MM. 107 (11 3)			
Deb	otor 1	Jose Ramire		le Name		Last Name			
	otor 2 use, if filing)	Gloria Ramir First Name	ez	le Name		Last Name			
Uni	ted States E	ankruptcy Court for	the: NORTHER	RN DISTR	ICT OF ILLIN	IOIS			
	se number					-			Check if this is an amended filing
n ea nink nfor nsv	chedu ch category, it fits best. mation. If mover every que the Describ o you own or	Be as complete and a pre space is needed, a section. Each Residence, But have any legal or equipment.	escribe items. List iccurate as possib attach a separate s	ole. If two mesheet to thing the	narried people s form. On the state You Ow	n asset fits in more than one of eare filing together, both are e e top of any additional pages, on or Have an Interest In land, or similar property?	equally responsib	le for supply	ing correct
1.1	3835 S R	idgeland s, if available, or other desc	cription		Single-family h				or exemptions. Put
	Officer address	s, ii available, of other desc	прион	ш	Duplex or mult Condominium	-	the amount of any secured claims on Schedu Creditors Who Have Claims Secured by Prop		
	Berwyn	IL	60402-0000	. 🖳	Manufactured Land	or mobile home	Current value of entire property?	po	urrent value of the ortion you own?
	City	State	ZIP Code	Uho h	Investment pro Timeshare Other as an interest Debtor 1 only	in the property? Check one		ture of your	\$110,000.00 ownership interest by the entireties, or
	County			■ □ Other i		the debtors and another bu wish to add about this item	(see instruction		nity property

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$110,000.00

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ebtor 2	Gloria Ramirez		Case number (if known)	
□ No	vans, trucks, tractors, sport utility v	ehicles, motorcycles		
Yes				
	ake: Honda odel: CRV	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured clair the amount of any secured Creditors Who Have Claims	claims on <i>Schedule D:</i>
Yea		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the	Current value of the portion you own?
Oth	her information:	\square At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$800.00	\$800.0
.2 Ma	ake: Cadillac	Who has an interest in the property? Check one	Do not deduct secured clair the amount of any secured	claims on <i>Schedule D:</i>
	odel: Deville	☐ Debtor 1 only	Creditors Who Have Claims	Secured by Property.
Yea	percylimate mileage: 140000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Current value of the
	her information:	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		☐ Check if this is community property (see instructions)	\$200.00	\$200.0
3 Ma	ake: Chevy	Who has an interest in the property? Check one	Do not deduct secured clair the amount of any secured	
Мо	odel: Nova	☐ Debtor 1 only	Creditors Who Have Claims	
Yea		Debtor 2 only		Current value of the
	proximate mileage: her information:	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	entire property?	portion you own?
	ner information.	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$200.00	\$200.0
	les: Boats, trailers, motors, personal w	nd other recreational vehicles, other vehicles, attercraft, fishing vessels, snowmobiles, motorcycle		
		wn for all of your entries from Part 2, including that number here		\$1,200.00
rt 3: D	Describe Your Personal and Household	tems		
		nterest in any of the following items?	po Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
<i>Examp</i> □ No	chold goods and furnishings ples: Major appliances, furniture, linen	s, china, kitchenware		
Yes	s. Describe			

Official Form 106A/B Schedule A/B: Property

Case 17-03995 Doc 1 Filed 02/10/17 Entered 02/10/17 18:27:18 Desc Main Page 12 of 52 Document Debtor 1 Jose Ramirez Debtor 2 **Gloria Ramirez** Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... **General Items of Wearing Apparel** \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$750.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes.....

Official Form 106A/B Schedule A/B: Property

Cash on Hand

\$100.00

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	tor 1 tor 2	Jose Ramirez Gloria Ramire	z		Case number (if known)	
	Exampi -				ounts; certificates of deposit; shares in credit unions, brokerage houses, and others with the same institution, list each.	er similar
	I No I Yes				Institution name:	
			17.1.	Checking	Chase 7293	\$792.00
			17.2.	Checking	Chase 6488	\$23.00
			17.3.	Checking	Chase 7450	\$442.00
_		mutual funds, or les: Bond funds, ir			okerage firms, money market accounts	
	1 Yes			Institution or issuer	name:	
•	joint ve No	enture	mation	interests in incorp about them	orated and unincorporated businesses, including an interest in an LLC, par % of ownership:	rtnership, and
_	Negotia Non-ne ■ No	able instruments in	nclude points are mation a	personal checks, cas those you cannot tra	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	Exampi] No		A, ERIS	SA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing plans	
•	■ Yes. L	ist each account		ely. of account:	Institution name:	
			401(k	x)	2	\$24,000.00
			401(k	x)		\$8,000.00
_	Your sh		deposit	s you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or others	
	1 Yes				Institution name or individual:	
	Annuitio	es (A contract for	a perio	dic payment of mon	ey to you, either for life or for a number of years)	
] Yes	lssu	er nam	e and description.		
2		s in an education C. §§ 530(b)(1), 52			ualified ABLE program, or under a qualified state tuition program.	
	Yes	Inst	tution r	name and descriptio	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. 1	Γrusts,	equitable or futu	re inte	rests in property (c	other than anything listed in line 1), and rights or powers exercisable for yo	ur benefit

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■ No

De	ebtor 1	Case 17-03995 Jose Ramirez	Doc 1	Filed 02/10/17 Document	Entered 02/1 Page 14 of 52		Desc Main
	ebtor 2	Gloria Ramirez			(Case number (if known)	
	ПYes	Give specific information a	bout them				
		s, copyrights, trademarks bles: Internet domain names				nts	
	☐ Yes.	Give specific information a	bout them				
27.	_Exam	es, franchises, and other ples: Building permits, exclu			n holdings, liquor licens	ses, professional licens	es
	■ No □ Yes.	Give specific information a	bout them				
М	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax ref	funds owed to you					·
	□ No	idilds office to you					
	Yes.	Give specific information at	oout them, inc	cluding whether you alre	ady filed the returns ar	nd the tax years	
				nated Tax Refund b previous years	ased upon	Federal	\$2,000.00
30.	Other a Examp No Yes.	Give specific information amounts someone owes yoles: Unpaid wages, disability benefits; unpaid loans Give specific information	/ou ty insurance p		efits, sick pay, vacatior	n pay, workers' comper	nsation, Social Security
		sts in insurance policies ples: Health, disability, or life	e insurance; h	nealth savings account (HSA); credit, homeowr	ner's, or renter's insurar	nce
		Name the insurance compa Com	any of each po pany name:	olicy and list its value.	Beneficia	ry:	Surrender or refund value:
	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No □ Yes. Give specific information.						
						_	
33.		s against third parties, who bles: Accidents, employmen				for payment	
		Describe each claim					
	■ No	contingent and unliquidat	ed claims of	every nature, including	g counterclaims of th	e debtor and rights to	set off claims
	⊔ Yes.	Describe each claim					
35.		nancial assets you did not	already list				
	■ No □ Yes.	Give specific information					

Case 17-03995 Doc 1 Filed 02/10/17 Entered 02/10/17 18:27:18 Desc Main Page 15 of 52 Document Debtor 1 Jose Ramirez Debtor 2 **Gloria Ramirez** Case number (if known) Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$35.357.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... \$0.00 List the Totals of Each Part of this Form

54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: 55. Part 1: Total real estate, line 2 \$110,000.00 Part 2: Total vehicles, line 5 \$1,200.00 Part 3: Total personal and household items, line 15 \$750.00 57. Part 4: Total financial assets, line 36 58. \$35,357.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$37,307.00 Copy personal property total \$37,307.00

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Total of all property on Schedule A/B. Add line 55 + line 62

\$147,307.00

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		12(12)	311 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this info	rmation to identify your	case:		
Debtor 1	Jose Ramirez			
	First Name	Middle Name	Last Name	
Debtor 2	Gloria Ramirez			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1 W	hich set of exemptions	are you claiming	2 Chack one only	even if your enough	ea ie filina with vou

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
3835 S Ridgeland Berwyn, IL 60402 Cook County	\$110,000.00		\$0.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2001 Honda CRV 142000 miles Line from Schedule A/B: 3.1	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
1998 Cadillac Deville 140000 miles Line from Schedule A/B: 3.2	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Ellie Holli Goricadie 74 B. 412			100% of fair market value, up to any applicable statutory limit	
1986 Chevy Nova Line from Schedule A/B: 3.3	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
ellie liotii goveddie /v.b. Gig			100% of fair market value, up to any applicable statutory limit	
General Items of Household Goods and Furnishings	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

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Gloria Ramirez Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **General Items of Wearing Apparel** 735 ILCS 5/12-1001(a) \$350.00 \$350.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash on Hand 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Chase 7293 735 ILCS 5/12-1001(b) \$792.00 \$792.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: Chase 6488 735 ILCS 5/12-1001(b) \$23.00 \$23.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Checking: Chase 7450 735 ILCS 5/12-1001(b) \$442.00 \$442.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(k): 2 735 ILCS 5/12-1006 \$24,000.00 \$24,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k): 735 ILCS 5/12-1006 \$8,000.00 \$8,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Federal: Estimated Tax Refund based 735 ILCS 5/12-1001(b) \$2,000.00 \$2,000.00 upon previous years Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Jose Ramirez

Debtor 1

Debtor 1 Debtor 2 Goouse f, filing) First Name	Case	17-03995	Doc 1 Filed 02/10/		d 02/10/17 18:: of 52	27:18 Desc N	1ain
Pietr Name Middle Name Last Name	Fill in this informatio	n to identify you					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			Middle Name	Last Name			
Case number (if those) Check if this is an amended filing Check if this claim relates to a community debt Check and the chart is an amended filing Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim is check all that apply. Check if th			Middle Name	Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? An Oc. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As Amount of claim Do not deduct the value of collateral that supports this claim in alphabetical order according to the creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Secured Disputed Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only At Iteast one of the debtors and another community debt Opened O4/07 Last	United States Bankrup	tcy Court for the	: NORTHERN DISTRICT OF	ILLINOIS			
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more spar spart is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case in the top						_	
s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Byson Cypress Waters Blvd Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Opened O4/107 Last			s Who Have Claim	s Secured	by Propert	у	12/15
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Resolved Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only An agreement you made (such as mortgage or secured care loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Opened 04/07 Last	s needed, copy the Addi number (if known).	tional Page, fill it	out, number the entries, and attac				
Part 1: List All Secured Claims 2. List all Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim bo not deduct the value of collateral. 2.1 Nationstar Mortgage LLC Creditor's Name Blvd Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 04/07 Last Column A Amount of claim bo not deduct the value of collateral. \$157,579.00 \$110,000.00 \$447,579.00 Column B Value of collateral that supports this claim bo not deduct the value of collateral. \$157,579.00 \$110,000.00 \$447,579.00 \$110,000.00 \$447,579.00 Column B Amount of claim bo not deduct the value of collateral that supports this claim If any \$110,000.00 \$447,579.00 \$447,579.00 Column B Amount of claim bo not deduct the value of collateral that supports this claim If any \$110,000.00 \$447,579.00 \$447,579.00 Column B Value of collateral that supports this claim so that as upports this claim If any \$47,579.00 \$447,579.00 Column B Column C Unsecured portion if any \$447,579.00 \$447,579.00 Safe the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Safe the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Safe the date you file, the claim is: Check all that apply. Safe the date you file, the claim is: Check all that apply. Safe the date you file, the claim is: Check all that apply. Safe the date you file the claim is: Check all that apply. Safe the date you file the claim is: Check all that apply. Saf	_ *		, , , ,				
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim is supports this claim. If more than one creditor has a particular claim, list the other creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Describe the property that secures the claim: 3835 S Ridgeland Berwyn, IL 60402 Cook County As of the date you file, the claim is: Check all that apply. Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 04/07 Last	<u> </u>			ther schedules. Yo	u have nothing else to	o report on this form.	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Copened 04/07 Last Column A Amount of claim Do not deduct the value of collateral. \$157,579.00 Says SRidgeland Berwyn, IL 60402 Cook County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Other (including a right to offset)	Yes. Fill in all o	f the information	below.				
2. List all secured claims. If a creditor has more than one secured claim, list the orreditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Nationstar Mortgage LLC Creditor's Name Describe the property that secures the claim: 3835 S Ridgeland Berwyn, IL 60402 Cook County As of the date you file, the claim is: Check all that apply. Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 04/07 Last Value of collateral that supports this claim Do not deduct the value of collateral. Value of collateral that supports this claim near the value of collateral. Value of collateral that supports this claim. Do not deduct the value of collateral. Value of collateral that supports this claim. Part 2. As Amount of claim Do not deduct the value of collateral. S157,579.00 \$110,000.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00 \$47,579.00	Part 1: List All Sec	ured Claims			0.4	0.1	0.1.0
2.1 Nationstar Mortgage LLC Creditor's Name Sescribe the property that secures the claim: Creditor's Name Sescribe the property that secures the claim: Sescribe the property the sescribe the claim: Sescribe the claim: As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file,	for each claim. If more th	an one creditor has	s a particular claim, list the other cred	ditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
8950 Cypress Waters Blvd Coppell, TX 75019 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Copened 04/07 Last As of the date you file, the claim is: Check all that apply. As of the date you file, the cla	2.1 Nationstar Mo	rtgage LLC	Describe the property that secu	res the claim:	*		\$47,579.00
Blvd	Creditor's Name			n, IL 60402			
Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened 04/07 Last Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	Blvd		apply.	is: Check all that			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another community debt Opened 04/07 Last Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset)							
□ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened 04/07 Last □ Opened 04/07 Last			☐ Disputed	oly.			
□ At least one of the debtors and another □ Check if this claim relates to a community debt Opened 04/07 Last □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Other (including a right to offset)	_ '			as mortgage or secu	ured		
Check if this claim relates to a community debt Opened 04/07 Last			☐ Statutory lien (such as tax lien, mechanic's lien)				
Community debt Opened 04/07 Last							
04/07 Last		elates to a	☐ Other (including a right to offse	et)			
Active		04/07 Last Active		. 2205			
Date debt was incurred 11/14/16 Last 4 digits of account number 2395	Date debt was incurred	11/14/16	Last 4 digits of account r	number			

Add the dollar value of your entries in Column A on this page. Write that number here: \$157,579.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$157,579.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	Page 1	9 of 52	-	
Fill in th	nis information to identi	fy your case:					
Debtor 1	Jose Rami	rez					
	First Name	Middle	Name	Last Name			
Debtor 2	0.0						
(Spouse if,	filing) First Name	Middle	Name	Last Name			
United S	States Bankruptcy Court f	or the: NORTHER	RN DISTRICT OF IL	LINOIS			
Case nu	ımber						
(if known)			_				Check if this is an
							amended filing
Officia	al Form 106E/F						
		ara Wha Havr		Claima			40/4E
	dule E/F: Credite						12/15 laims. List the other party to
Schedule left. Attac	D: Creditors Who Have Clar th the Continuation Page to I case number (if known).	aims Secured by Prop this page. If you have	erty. If more space is e no information to re	needed, copy	any creditors with partially s the Part you need, fill it out, do not file that Part. On the t	number the	entries in the boxes on the
1. Do a	ny creditors have priority ι	ınsecured claims agai	inst you?				
■ N	lo. Go to Part 2.						
ΠY	es.						
Part 2:	List All of Your NONE	PRIORITY Unsecure	ed Claims				
3. Do a	ny creditors have nonprior	ity unsecured claims	against you?				
□N	lo. You have nothing to repor	t in this part. Submit thi	s form to the court with	your other sche	edules.		
■ Y	es.						
unse	cured claim, list the creditor one creditor holds a particular	separately for each clair	m. For each claim listed	d, identify what t	holds each claim. If a credit ype of claim it is. Do not list clathree nonpriority unsecured c	aims already	included in Part 1. If more
							Total claim
	American General						
4.1	Financial/Springleaf	Fi	Last 4 digits of acc	count number	4277		Unknown
	Nonpriority Creditor's Name	A ((0	A - 15	
	Springleaf Financial/ Bankruptcy De	Attn:	When was the deb	t incurred?	Opened 07/06 Last / 12/29/06	Active	
	Po Box 3251				12/20/00		
_	Evansville, IN 47731						
	Number Street City State ZIp		As of the date you	file, the claim	s: Check all that apply		
	Who incurred the debt? Ch	neck one.					
	Debtor 1 only		☐ Contingent				
	☐ Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor 2 or	nly	☐ Disputed Type of NONPRIOR				
	☐ At least one of the debtor	s and another					
	☐ Check if this claim is fo	r a community	☐ Student loans				
	debt Is the claim subject to offs	et?	Obligations arising report as priority cla		ration agreement or divorce the	nat you did no	ot
	No		Debts to pension	n or profit-sharin	g plans, and other similar deb	ts	
	☐ Yes ☐ Other. Specify Automobile						
			· -				

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Debtor Debtor	1 Jose Ramirez 2 Gloria Ramirez		Case number (if know)				
4.2	American Scientific Med Lab Nonpriority Creditor's Name	Last 4 digits of account number		\$128.04			
	7006 N Western Ave Chicago, IL 60645	When was the debt incurred?	10/31/2016				
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	Disputed	od alatina.				
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	ed claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		☐ Obligations arising out of a separation agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	Yes	Other. Specify Medical					
4.3	Capital One / Menard Nonpriority Creditor's Name	Last 4 digits of account number	6902	\$2,417.00			
	Attn: Bankruptcy Dept Po Box 30258	When was the debt incurred?	Opened 09/05 Last Active 12/16				
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	із. Спеск ан тас арріу				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Charge Ac	count				
4.4	Chase	Last 4 digits of account number	4542	\$17,613.00			
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 04/07 Last Active 12/30/16				
-	Wilmingotn, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Officer all trial apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	= -				
	☐ Yes	Other. Specify Home Equ	ity Line Of Credit				

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Debtor 2 Gloria Ramirez							
4.5	Chase Card	Last 4 digits of account number	3849	\$1,090.00			
	Nonpriority Creditor's Name Attn: Correspondence Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 01/10 Last Active 12/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharir					
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	5307	\$1,796.00			
	Attn: Correspondence Po Box 15298	When was the debt incurred?	Opened 11/02 Last Active 12/16				
	Wilmington, DE 19850						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	Is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharir					
	☐ Yes	Other. Specify Credit Card	<u> </u>				
4.7	Choice Recovery Inc Nonpriority Creditor's Name	Last 4 digits of account number	8438	\$3,500.00			
	1550 Old Henderson Rd Ste 100 Columus, OH 43220	When was the debt incurred?	Opened 01/16 Last Active 03/12				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	\square At least one of the debtors and another						
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharir	ng plans, and other similar debts				
	☐ Yes	Other. Specify	Attorney Advantage Mri A				

Debtor 1 Jose Ramirez

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Debtor 1 Debtor 2	Jose Ramirez Gloria Ramirez		Case number (if know)	
	MacNeal Hospital	Last 4 digits of account number	4358	\$5,272.00
2	onpriority Creditor's Name 884 Paysphere Circle hicago, IL 60674	When was the debt incurred?	12/21/2016	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
ı	☐ Yes	Other. Specify Medical		
	Med Business Bureau Nonpriority Creditor's Name	Last 4 digits of account number	2006	\$271.00
	1460 Renaissance Dr #400 Park Ridge, IL 60068	When was the debt incurred? Opened 04/15 Last Active 11/13		
1	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
l	Debtor 1 and Debtor 2 only	☐ Disputed		
ı	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharing		
I	☐ Yes	Other. Specify Collection	Attorney Rush Oak Park H	
<u> </u>	Med Business Bureau	Last 4 digits of account number	0785	\$164.00
ı	Nonpriority Creditor's Name		Opened 09/14 Last Active	
I	1460 Renaissance Dr #400 Park Ridge, IL 60068	When was the debt incurred?	04/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
(debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
İ	No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	☐ Yes	Other. Specify Collection	Attorney Elmhurst Emerg	

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Debto	Gloria Ramirez		Case number (if know)					
4.1	Merchants Credit	Last 4 digits of account number	2794	\$54.00				
	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700 Chicago, IL 60606	When was the debt incurred?	Opened 10/16 Last Active 06/16					
	Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim	s: Check all that apply					
	_	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed	d alaim.					
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d Claim:					
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	,					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□Yes	■ Other. Specify Collection Profession	Attorney Midwest Imaging als					
4.1	Midwest Imaging Professionals Nonpriority Creditor's Name	Last 4 digits of account number	5088	\$12.00				
	PO Box 371863 Pittsburgh, PA 15250	When was the debt incurred?	08/2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	☐ Debtor 1 only	2 Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	nation agreement of arverse that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Medical						
4.1	MiraMed Revenue Group Nonpriority Creditor's Name	Last 4 digits of account number	7542	\$48.00				
	Dept 77304 PO Box 77000	When was the debt incurred?	06/2016					
	Detroit, MI 48277 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	■ Other. Specify Medical						
	_ 103	Other. Specify						

Debtor 1 Jose Ramirez

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Debto	or 2 Gloria Ramirez		Case number (if know)								
l.1	Morteza Dini	Last 4 digits of account number	4755	\$481.00							
	Nonpriority Creditor's Name 2740 W Foster Ave Ste 207	When was the debt incurred?	07/2016								
	Chicago, IL 60625 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply									
	Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	■ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts								
	Yes	Other. Specify Medical									
.1	Nationwide Credit & Collection	Last 4 digits of account number	5782	\$470.00							
	Nonpriority Creditor's Name c/o Evergreen Bank Group PO Box 3219	When was the debt incurred?	05/2016								
	Hinsdale, IL 60522 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply								
	Debtor 1 only	☐ Contingent									
	Debtor 2 only	☐ Unliquidated									
	■ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts								
	Yes	Other. Specify Collection									
.1	Onemain	Last 4 digits of account number	2980	\$8,297.00							
	Nonpriority Creditor's Name Po Box 1010 Evansville, IN 47706	When was the debt incurred?	Opened 06/16 Last Active 12/16								
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply								
	Debtor 1 only	☐ Contingent									
	■ Debtor 2 only	☐ Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not								
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts								
	Yes	Other. Specify Secured									

Debtor 1 Jose Ramirez

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Debtor Debtor	1 Jose Ramirez 2 Gloria Ramirez		Case number (if know)	
4.1 7	Presence Health	Last 4 digits of account number	0888	\$48.00
	Nonpriority Creditor's Name 62314 Collection Center Dr Chicago, IL 60693	When was the debt incurred?	10/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
4.1	Presence Sts Mary & Elizabeth Med C	Last 4 digits of account number	6612	\$1,101.70
	Nonpriority Creditor's Name Patient Financial Services 1643 Lewis Ave Suite 203 Billings, MT 59102	When was the debt incurred?	6/13/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 9	Presence Sts Mary & Elizabeth Med C Nonpriority Creditor's Name	Last 4 digits of account number	8140	\$450.72
	Patient Financial Services 1643 Lewis Ave Suite 203 Billings, MT 59102	When was the debt incurred?	07/11/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	d claim:		
	\square At least one of the debtors and another			
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	malana and alban 1. 9 . 1.11	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		

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Debtor Debtor	1 Jose Ramirez 2 Gloria Ramirez	Document Fage 20	Case number (if know)					
			· · · · · · · · · · · · · · · · · · ·					
4.2	Rush Oak Park Hospital	Last 4 digits of account number	0002	\$384.00				
	Nonpriority Creditor's Name Patient Payment 26099 Network Place Chicago, IL 60673	When was the debt incurred?	06/2016					
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Medical						
4.2	Rush University Medical Center	Last 4 digits of account number	8317	\$80.00				
	Nonpriority Creditor's Name	M	07/0040					
	PO Box 4075 Carol Stream, IL 60197	When was the debt incurred?	07/2016					
-	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only							
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Medical						
4.2	SME Pathologists	Last 4 digits of account number	0250	\$5.00				
	Nonpriority Creditor's Name PO Box 3133	When was the debt incurred?	06/2016					
-	Indianapolis, IN 46206 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	• ,	,					
	☐ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Medical						

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r 1 Jose Ramirez r 2 Gloria Ramirez	Case number (if know)						
Synchrony Bank/Sams	Last 4 digits of account number	6201	\$4,734.0				
Nonpriority Creditor's Name Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/06 Last Active 7/17/16					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
☐ Yes	Other. Specify Charge Ac	count					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total	OI.	ottuent toans	Oi.	Φ	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	48,416.46
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	48,416.46

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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		<u> </u>	III PAUE 70 UI 37	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jose Ramirez			
	First Name	Middle Name	Last Name	
Debtor 2	Gloria Ramirez			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Charle White in a
(II KHOWH)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or	company with Name, Number,	whom you have the Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
Name				
Number	Street			<u> </u>
City		State	ZIP Code	
Name				
Number	Street			_
City		State	7IP Codo	<u> </u>
City		State	ZIF Code	
Name				
Number	Street			
Citv		State	ZIP Code	_
Name				
Number	Street			<u> </u>
City		State	ZIP Code	_
- · · · ·		Oldio	211 0000	
Name				_
Number	Street			<u> </u>
City		State	ZIP Code	<u> </u>
	Name Number City Name Number City Name Number City Name Number City Name	Name Number Street City Name Number Street	Number Street City State Name Number Street Name Number Street City State	Number Street City State ZIP Code Name Number Street City State ZIP Code

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		Docume	nt Page 29 d	<u>f 52</u>
Fill in thi	s information to identify your	case:		
Debtor 1	Jose Ramirez			
	First Name	Middle Name	Last Name	
Debtor 2	Gloria Ramirez	MC LUI N		
(Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case nur	nher			
(if known)				☐ Check if this is an
				amended filing
Officia	J Form 1064			
	al Form 106H			
Sche	dule H: Your Cod	lebtors		12/15
Arizo	s	, Nevada, New Mexico, Pu	erto Rico, Texas, Washi	y? (Community property states and territories include ngton, and Wisconsin.)
in lin Form	e 2 again as a codebtor only	if that person is a guarant	tor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and 2	IP Code		Check all schedules that apply:
3.1				☐ Schedule D. line
3.1	Name			Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
	Number Street	State	ZIP Code	_

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Eill	in this information	to identify your o	200				ı				
	in this information to the total to the tota	Jose Ramire									
	otor 2 buse, if filing)	Gloria Rami	rez			_					
		otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number						- ''	nended filir plement sh	nowin	ng postpetition chollowing date:	napter
0	fficial Form	1061					MM / [DD/ YYYY	-	J	
S	chedule I:	Your Inc	ome					,			12/15
sup spo atta	plying correct infouse. If you are sepech a separate she	ormation. If you parated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your s ith you, do not includ	pouse de infor	is liv mati	ing with you, on about you	, include i ır spouse.	nforr	mation about yo ore space is ne	our eded,
1.	Fill in your emplinformation.	loyment		Debtor 1			Dek	btor 2 or n	on-fi	iling spouse	
				■ Employed	■ Employed			Employed			
	attach a separate information about		☐ Not employ		oyed D			Not emplo	yed		
	employers.		Occupation								
	Include part-time self-employed wo		Employer's name	Whitney Foods			Fer	rrara Car	ndy (Company	
	Occupation may or homemaker, if		Employer's address	2541 S Damen A Chicago, IL 6060				e Tower la Park, I		e, Suite 2700 181	
			How long employed to	here?							_
Par	t 2: Give De	tails About Mor	thly Income								
	mate monthly incuse unless you are		ate you file this form. If	you have nothing to re	port for	any l	line, write \$0 i	in the spac	e. Ind	clude your non-fi	ling
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the information	for all	emplo	oyers for that p	person on	the li	ines below. If you	ı need
							For Debtor			btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	2,010	<u>).00</u> \$		2,156.00	
3.	Estimate and lis	t monthly overt	me pay.		3.	+\$	0	.00 +\$		0.00	

2,010.00

2,156.00

Calculate gross Income. Add line 2 + line 3.

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Debi	tor 1 tor 2	Jose Ramirez Gloria Ramirez			Cas	e number (if known) _					
						or Debtor 1		non-	Debtor -filing s	pouse		
	Cop	by line 4 here	4.		\$	2,010.00	<u> </u>	\$	2,	156.00	0_	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	477.00)_	\$		356.88	В	
	5b.	Mandatory contributions for retirement plans		b.	\$	0.00	_	\$		0.00	_	
	5c.	Voluntary contributions for retirement plans	50		\$	0.00	_	\$		201.80		
	5d.	Required repayments of retirement fund loans		d.	\$	0.00	_	\$		179.70		
	5e.	Insurance	_	e.	\$	0.00	_	\$		442.2		
	5f.	Domestic support obligations	5f		\$	0.00	_	\$		0.00	_	
	5g.	Union dues	50	_	\$	0.00	_	\$		0.00		
	5h.	Other deductions. Specify:	_	h.+	· -	0.00	_	· : —		0.00	_	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	477.00		\$	·	180.68		
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,533.00	<u> </u>	\$		975.32	2	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8:	a.	\$	0.00	1	\$		0.00	n	
	8b.	Interest and dividends		b.	\$	0.00	_	<u>\$</u> —		0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	<u> </u>	\$		0.00	<u>-</u>	
	8d.	Unemployment compensation	80	d.	\$	0.00)	\$		0.0	0	
	8e.	Social Security	86	е.	\$	0.00)	\$		0.0	0	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	0.00	_	\$		0.00		
	8g.	Pension or retirement income	80		\$	0.00	_	\$		0.00		
	8h.	Other monthly income. Specify:	_ 81	h.+	\$_	0.00	_ +	* *		0.00	<u> </u>	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	0.00)	\$		0.0	00	
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		1,533.00 +	\$	q	75.32	= \$	2.5	08.32
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		1,000.00	* —		70.02		_,0	00.02
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			•			Schedule 11.			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certail lies							12.	\$	2,5	08.32
13.	Do v	you expect an increase or decrease within the year after you file this form	?						·	Comb		ome
		No. Yes. Explain:										

Official Form 106I Schedule I: Your Income page 2

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					ı		
Fill in this infor	mation to identify y	our case:					
Debtor 1	Jose Ramire	ez			Ch	eck if this is:	
Debtor 2 (Spouse, if filing)	Gloria Rami	rez					ing showing postpetition chapter s of the following date:
United States Ba	nkruptcy Court for the	e: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYY	Υ
Case number (If known)							
Official F	orm 106J				!		
	le J: Your	Exper	1888				12/1
Be as comple information. It number (if kn	te and accurate a	s possible. eeded, atta ery questio	If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are ed any addi	qually responsib itional pages, wr	le for supplying correct ite your name and case
1. Is this a	oint case?						
	to line 2.						
Yes. D	oes Debtor 2 live	in a separ	ate household?				
	No Yes. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ebtor 2.	
2. Do you h	ave dependents?	■ No					
•	Debtor 1 and	□ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	s Does dependent live with you?
Do not sta depender	ate the ts names.						□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
expenses	expenses include s of people other to and your depende	than 🗖	No Yes				
Estimate your	of a date after the	our bankrı	uptcy filing date unless y				Chapter 13 case to report op of the form and fill in the
	uch assistance ar		government assistance i luded it on <i>Schedule I:</i>)			Your	expenses
	al or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4.	\$	1,200.00
If not inc	luded in line 4:						
4a. Re	al estate taxes				4a.	\$	0.00
	perty, homeowner	's, or renter	's insurance		4b.	·	0.00
	ne maintenance, r				4c.		0.00
	meowner's associa				4d.	·	0.00
5. Addition:	u mortgage pavm	ents for vo	our residence , such as ho	me equity loans	5.	35	0.00

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Gloria Ramirez	Case numb	per (if known)	
ies:			
Electricity, heat, natural gas	6a.	\$	150.00
Water, sewer, garbage collection	6b.	\$	0.00
Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
Other. Specify:	6d.	\$	0.00
	7.	\$	500.00
dcare and children's education costs	8.	\$	0.00
ning, laundry, and dry cleaning	9.	\$	100.00
onal care products and services	10.	·	50.00
ical and dental expenses	11.	\$	0.00
•		*	
ot include car payments.	12.	\$	250.00
rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
itable contributions and religious donations	14.	\$	0.00
rance.			
ot include insurance deducted from your pay or included in lines 4 or 20.			
		·	0.00
Health insurance		·	0.00
Vehicle insurance	15c.	\$	120.00
Other insurance. Specify:	15d.	\$	0.00
s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
ify:	16.	\$	0.00
		•	
		·	0.00
• •		*	0.00
	17c.	\$	0.00
	17d.	\$	0.00
		c	0.00
	6l). 10.	·	
	40	>	0.00
·		Incomo	
			0.00
		·	0.00
		:	
		·	0.00
		·	0.00
			0.00
r: Specity:		+\$	0.00
ulate your monthly expenses			
Add lines 4 through 21.		\$	2,570.00
Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	
		\$	2,570.00
Add line 22d and 22b. The result is your monary expenses.			2,370.00
ulate your monthly net income.			
, ,		·	2,508.32
Copy your monthly expenses from line 22c above.	23b.	-\$	2,570.00
	1		
	220	\$	-61.68
The result is your monthly net income.	23C.	Ψ	-01.00
and the second s	n van £la 4b!-	farma	
	r vali tile this	torm?	
ou expect an increase or decrease in your expenses within the year after			and decrease herause of a
xample, do you expect to finish paying for your car loan within the year or do you expect			or decrease because of a
			e or decrease because of a
did not seem to the seem of th	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Ideare and children's education costs hing, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Dother. Specify: payments of alimony, maintenance, and support that you did not reported from your pay on line 5, Schedule I, Your Income (Official Form 10t) r payments you make to support others who do not live with you. ify: r real property expenses not included in lines 4 or 5 of this form or on S Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues r: Specify: ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J Add line 22a and 22b. The result is your monthly expenses.	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. Other. Specify: 1 and housekeeping supplies 1 care and children's education costs 1 sing, laundry, and dry cleaning 9 onal care products and services 1 cal and dental expenses 1 sportation. Include gas, maintenance, bus or train fare. 2 trinclude car payments. 2 trainment, clubs, recreation, newspapers, magazines, and books 1 itable contributions and religious donations 1 italiale insurance deducted from your pay or included in lines 4 or 20. Life insurance 1 trinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance 1 trinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance 1 to not include taxes deducted from your pay or included in lines 4 or 20. Life insurance 2 to not include taxes deducted from your pay or included in lines 4 or 20. Life insurance 3 to not include taxes deducted from your pay or included in lines 4 or 20. Life insurance 3 to not include taxes deducted from your pay or included in lines 4 or 20. Life insurance 3 to not include taxes deducted from your pay or included in lines 4 or 20. Life insurance 4 to 20. Life insurance specify: 2	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cither, Specify: 1 and housekeeping supplies Icare and children's education costs 1 and housekeeping supplies Icare and children's education costs 1 and housekeeping supplies Icare and children's education costs 1 and found that of cleaning 1 and read that expenses 1 and children's education costs 1 and education costs 1 and found that expenses 1 and education include gas, maintenance, bus or train fare. 2 and include care payments. 2 and include gas, maintenance, bus or train fare. 3 and care payments, retainment, clubs, recreation, newspapers, magazines, and books 1 and include insurance deducted from your pay or included in lines 4 or 20. 3 and care. 4 bealth insurance 4 bealth insurance 5 continuous and religious donations 5 and care. 5 and care. 6 bealth insurance 7 and care. 7 bealth insurance 8 continuous and religious donations 8 continuous and religious donations 9 and care and contributions and religious donations 1 and care. 9 and care and contributions and religious donations 1 and care and contributions and religious donations 1 and contributions 1 and contr

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Fill in this infor	matian to identify your						
	mation to identify your	case.				1	
Debtor 1	Jose Ramirez	ACT III AT					
Dalatan	First Name	Middle Name	Las	t Name			
Debtor 2	Gloria Ramirez First Name	Middle Name	Loo	t Name			
(Spouse if, filing)	Filst Name	Middle Name	Las	l Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT O	F ILLINO	S			
Case number							
(if known)							Check if this is an amended filing
f two married per You must file thing the staining money	eople are filing togethe	r, both are equally respons le bankruptcy schedules on connection with a bankru 519, and 3571.	sible for s	upplyir	ng correct information. edules. Making a false sta		
Sign	n Below						
Did you pa	y or agree to pay some	one who is NOT an attorne	ey to help	you fil	II out bankruptcy forms?		
■ No							
☐ Yes. N	. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
	alty of perjury, I declare e true and correct.	that I have read the summa	ary and s	chedul	les filed with this declarat	ion and	
X /s/ Jos	e Ramirez		Х	/s/ GI	Ioria Ramirez		
	Ramirez			Gloria	a Ramirez		
Signatu	re of Debtor 1			Signat	ture of Debtor 2		
Date	February 10, 2017			Date	February 10, 2017		

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Fill	in this infor	nation to identify you	r case:			
	otor 1	Jose Ramirez				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	Gloria Ramirez First Name	Middle Name	Last Name		
` .						
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number _					heck if this is an mended filing
St		of Financial		duals Filing for B		4/16
info nun	rmation. If n	nore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for suppy additional pages, write you	
Pai	t 1: Give I	Details About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is you	r current marital statu	is?			
	■ Married Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you li	ived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
	Debtor 1 P	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
			iouaio i ii i oui oouooioio (o			
Pai	t 2 Expla	in the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including partetogether, list it only once ur		dar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,549.89	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	otor 1 otor 2		se Ramire oria Ramir		Case number (if known)							
					Debtor 1					Debtor 2		
					Sources	of income that apply.	(befo	s income re deductions a sions)	ınd	Sources of inc		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)		•	■ Wages, commissions, \$42,927.41 bonuses, tips				☐ Wages, commissions, bonuses, tips					
					☐ Opera	ting a business				☐ Operating a	business	
			lar year be December		■ Wages	s, commissions, tips		\$63,191	.00	☐ Wages, combonuses, tips	ımissions,	\$0.00
					☐ Opera	ting a business				Operating a	business	
	List e	No	ource and t	Ū	ome from ea	ach source separa	ately. Do	not include inco	ome th	at you listed in lir	ne 4.	
	_			4 - 11 -								
	_	165.1	ili ili tile de	taiis.								
					Debtor 1 Sources Describe	of income below.	each (befo	s income from source re deductions a sions)		Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	vments You	Made Befo	ore You Filed for	Bankrui	otcv				
6.	_	No.	Neither Deindividual puring the No. Yes	ebtor 1 nor E orimarily for a 90 days befo Go to line 7 List below e paid that cr not include to adjustmen	Debtor 2 has personal, fore you filed a creditor. Do re payments to 1/15	amily, or househo I for bankruptcy, d or to whom you pa	umer de bld purpo: lid you pa lid a total nts for do this bank rs after th	bts. Consumer se." ay any creditor at of \$6,425* or no mestic support ruptcy case. last for cases file	a total nore in obliga	of \$6,425* or mo one or more pay ations, such as ch	re? /ments and thild support a	1(8) as "incurred by an ne total amount you nd alimony. Also, do
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?												
			No.	Go to line 7								
☐ Yes List below each creditor to whom you paid a total of \$600 of include payments for domestic support obligations, such a attorney for this bankruptcy case.												
	Cre	ditor's	Name and	l Address		Dates of paymo	ent	Total amou		Amount you	Was this p	payment for
								pai	ia	still owe		

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Jose Ramirez

Debt	or 2	Gloria Ramirez			Cas	se number (if known)		
6	Within 1 year before you filed for bankru Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony.		rtner cont	rs; relatives of any general, or owner of 20% of	neral partners; partners or more of their voting	erships of w g securities	hich yo ; and ar	u are a genera ny managing a	al partner; corporation gent, including one fo
		No							
		Yes. List all payments to an insider. der's Name and Address	Da	ites of payment	Total amount	Amount	you owe	Reason for	this payment
i	insid	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos	•		paid yments or transfer a			ccount of a de	ebt that benefited an
		No Yes. List all payments to an insider							
	Insid	der's Name and Address	Da	ates of payment	Total amount paid	Amount	you	Reason for Include cred	this payment itor's name
Part	4:	Identify Legal Actions, Repossession	ns, a	nd Foreclosures					
ı	List a	in 1 year before you filed for bankrupt Il such matters, including personal injury iications, and contract disputes.	•	, , ,	•	,		•	•
 	_ `	No Yes. Fill in the details.							
		e title e number	Na	ture of the case	Court or agency			Status of th	e case
		n 1 year before you filed for bankrupt k all that apply and fill in the details below		as any of your prop	erty repossessed, f	oreclosed,	garnis	hed, attached	I, seized, or levied?
 	_	No. Go to line 11. Yes. Fill in the information below.							
	Cred	litor Name and Address		escribe the Property	a.		Date		Value of the property
11. \	Withi	n 90 days before you filed for bankru		cplain what happene did any creditor, ind		nancial ins	titution	, set off any a	mounts from your
i 	= 1	unts or refuse to make a payment bed	ause	you owed a debt?					
		Yes. Fill in the details. Sitor Name and Address	De	escribe the action th	e creditor took			action was	Amount
		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a			erty in the possess	ion of an a	taken ssigne		efit of creditors, a
 	_	No Yes							
Part	5:	List Certain Gifts and Contributions							
ļ	= 1	in 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy,	did you give any gift	ts with a total value	of more th	an \$60	0 per person?	?
	Gifts	s with a total value of more than \$600 person		Describe the gifts			Dates the g	s you gave ifts	Value
		son to Whom You Gave the Gift and ress:							

Debtor 1

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Debtor 1 Jose Ramirez

Debtor 2 Gloria Ramirez

Case number (if known)

14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o			s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	or gambling?	ıptcy or	since you filed for bankruptcy, did y	ou lose anytl	ning because of thef	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loe the amount that insurance has paid. Lace claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition position of the No Yes. Fill in the details. Person Who Was Paid Address Email or website address	prepari i preparer	ng a bankruptcy petition?	vices required		rty to anyone you Amount of payment
	Person Who Made the Payment, if Not YVLO PC 3818 S Harlem Lyons, IL 60534	You			02/10/2017	\$1,500.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that the No	ditors o	r to make payments to your creditors		r transfer any prope	rty to anyone who
	Yes. Fill in the details.				_	
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all	u r busin s made a	ess or financial affairs? as security (such as the granting of a se			
	No☐ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made
	Person's relationship to you					

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Debtor 1 Jose Ramirez

Debtor 2 Gloria Ramirez

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Case number (if known)

19.	9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No							
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	operty tran	sferred	Date Transfer was made		
Pa	tt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and S	torage Uni	its			
20.	sold, moved, or transferred? Include checking, savings, money market, or	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
		ast 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for	bankruptcy, a	any safe de	posit box or other depos	itory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befo	ore you filed for bankrupto	cy?		
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
Pa	rt 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any prope	rty you boı	rrowed from, are storing t	for, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Pa	tt 10: Give Details About Environmental Inform	mation						
For	the purpose of Part 10, the following definition	ıs apply:						
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, groun					
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	_	environmental	law, wheth	ner you now own, operate	e, or utilize it or used		
	Hazardous material means anything an environment of		as a hazardou	s waste, ha	azardous substance, toxi	c substance,		

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **Jose Ramirez**Debtor 2 **Gloria Ramirez**

Case number (if known)

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	☐ Yes. Fill in the details. Name of site	Environmental law, if you	Date of notice						
	Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	know it	Date of Hotice				
25.	Have you notified any governmental unit of any i	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)								
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	viron	mental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	iture of the case	Status of the case				
Par	11: Give Details About Your Business or Conr	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have a	any o	f the following connections to any	business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or €	equity securities of a corporation	n						
	■ No. None of the above applies. Go to Part 1	12.							
	Yes. Check all that apply above and fill in th	ne details below for each busines	ss.						
		scribe the nature of the business	3	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper		Do not include Social Security n Dates business existed	umber or IIIN.				
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No □ Yes. Fill in the details below.								
		e Issued							
	Address (Number, Street, City, State and ZIP Code)								

Entered 02/10/17 18:27:18 Case 17-03995 Doc 1 Filed 02/10/17 Document Page 41 of 52 Jose Ramirez Debtor 1 Debtor 2 Gloria Ramirez Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose Ramirez /s/ Gloria Ramirez Jose Ramirez Gloria Ramirez Signature of Debtor 1 Signature of Debtor 2 Date February 10, 2017 February 10, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jose Ramirez			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Gloria Ramirez First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Chap	ter 7 12/15
	ividual filing under cha e claims secured by yo	• •	ll out this form if:	
You must file thi	ever is earlier, unless th	rithin 30 days after	not expired. r you file your bankruptcy petition or by the date ne time for cause. You must also send copies to	
	eople are filing togethe	r in a joint case, bo	oth are equally responsible for supplying correct	t information. Both debtors must
	and accurate as possik our name and case nu		s needed, attach a separate sheet to this form. C	On the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
	ors that you listed in P		D: Creditors Who Have Claims Secured by Prope	erty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property the secures a debt?	nat Did you claim the property as exempt on Schedule C?
Creditor's N	lationstar Mortgage	LLC	☐ Surrender the property.☐ Retain the property and redeem it.	□ No
	3835 S Ridgeland	Berwyn, II	■ Retain the property and enter into a	■ Yes
property securing debt:	60402 Cook Coun	•	Reaffirmation Agreement. Retain the property and [explain]:	
Dort Or Liet V	ave Unavaised Davage	I Dramanti I agasa		
For any unexpire in the information	on below. Do not list rea	ase that you listed al estate leases. U	I in Schedule G: Executory Contracts and Unexp nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(the lease period has not yet ended.
Describe your u	inexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:		•		П.,
Description of lea Property:	ased			□ No □ Yes
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
Lessor's name:				⊔ Tes
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 Debtor 2	Jose Ramirez Gloria Ramirez	Case number (if known)
Description Property:	on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No
Lessor's i Description Property:	name: on of leased	□ No □ Yes
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicated r hat is subject to an unexpired lease.	ny intention about any property of my estate that secures a debt and any personal
Jos	lose Ramirez e Ramirez ature of Debtor 1	X /s/ Gloria Ramirez Gloria Ramirez Signature of Debtor 2
Date	February 10, 2017	Date February 10, 2017

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-03995 Doc 1 Filed 02/10/17 Entered 02/10/17 18:27:18 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	Jose Ramirez re Gloria Ramirez		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEV FOR DI	FRTOR(S)	
				` ,	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the fili be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rene	dered or to
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	bers and associates of r	ny law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				w firm. A
5.	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspects	s of the bankruptcy	ease, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. Representation of the debtor in adversary proceeding e. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home 	tement of affairs and plan which fors and confirmation hearing, an gs and other contested bankrupto reduce to market value; exe ons as needed; preparation	may be required; d any adjourned hea y matters; emption planning	rings thereof; preparation and fil	ing of
6.	By agreement with the debtor(s), the above-disclosed fe	ee does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of ar s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the del	btor(s) in
	February 10, 2017	/s/ Hanna Kayali			
-	Date	Hanna Kayali			_
		Signature of Attorne VLO, P.C.	y		
		3818 S. Harlem Lyons, IL 60534			

312-600-7000 Fax: 708-777-1638 docs@victorylawoffice.com

Name of law firm

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United States Bankruptcy Court Northern District of Illinois

In re	Jose Ramirez Gloria Ramirez		Case No.	
	Oloria Railinoz	Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors: _	24
	The above-named Debtor(our) knowledge.	s) hereby verifies that the list of credit	tors is true and	correct to the best of my
Date:	February 10, 2017	/s/ Jose Ramirez Jose Ramirez Signature of Debtor		
Date:	February 10, 2017	/s/ Gloria Ramirez Gloria Ramirez		
		Signature of Debtor		

American General Financial/Springleaf Fi Springleaf Financial/Attn: Bankruptcy De Po Box 3251 Evansville, IN 47731

American Scientific Med Lab 7006 N Western Ave Chicago, IL 60645

Capital One / Menard Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130

Chase Attn: Correspondence Dept Po Box 15298 Wilmingotn, DE 19850

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

MacNeal Hospital 2384 Paysphere Circle Chicago, IL 60674

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068 Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Midwest Imaging Professionals PO Box 371863 Pittsburgh, PA 15250

MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit, MI 48277

Morteza Dini 2740 W Foster Ave Ste 207 Chicago, IL 60625

Nationstar Mortgage LLC 8950 Cypress Waters Blvd Coppell, TX 75019

Nationwide Credit & Collection c/o Evergreen Bank Group PO Box 3219 Hinsdale, IL 60522

Onemain Po Box 1010 Evansville, IN 47706

Presence Health 62314 Collection Center Dr Chicago, IL 60693

Presence Sts Mary & Elizabeth Med C Patient Financial Services 1643 Lewis Ave Suite 203 Billings, MT 59102

Presence Sts Mary & Elizabeth Med C Patient Financial Services 1643 Lewis Ave Suite 203 Billings, MT 59102 Rush Oak Park Hospital Patient Payment 26099 Network Place Chicago, IL 60673

Rush University Medical Center PO Box 4075 Carol Stream, IL 60197

SME Pathologists PO Box 3133 Indianapolis, IN 46206

Synchrony Bank/Sams Po Box 965060 Orlando, FL 32896